



DoD Pharmacoeconomic Center Fort Sam Houston, TX

Prescription Medication Analysis & Reporting Tool (PMART)



Report Tool Summary

- Medication profile snapshot for deploying SMs
 - Pre-deployment medication screening
 - Identification of high-risk SMs
 - Identification of SMs who require CENTCOM waiver
- Menu-driven, Microsoft Access database with look-up features and reports
- Pharmacy Data Transaction Service (PDTs) is data source
 - All DoD Pharmacy points of service
- Report turn-around 24 – 72 hours



Deployment PMART Homepage



P-MART
Prescription
Medication
Analysis &
Reporting Tool

A service provided by the TMA Pharmacy Operations Center (joc.barnes@ndg.mil)

Version 5 • May 2009

*Subject to the Privacy Act of 1974
(PL 93-579)*

☐ About This Program

☐ Patient Medication Profiles

☐ Utilization by Drug

☐ Master Reports Selection

☐ Details/Admin Settings

[Exit This Application](#)

A Service Provided By The TMA Pharmacoeconomic Center • Ft Sam Houston • Texas



About This Program Button

P-MART | Prescription Medication Analysis And Reporting Tool - About

P-MART | Prescription Medication Analysis And Reporting Tool

This program was developed to aid healthcare providers responsible for the medical care of deploying service men and women. The intent is to identify individuals who might require a more intensive medical review or to alert healthcare providers of medication needs not available in standard deployment packs.

High Risk Medications are defined here as those medications, when not provided, have the potential for a significant therapeutic failure possibly resulting in a medical evacuation. Included are medications used in the treatment of diabetes, epilepsy, most psychiatric conditions, conception, HIV, asthma, malaria or tuberculosis prophylaxis, smoking cessation, prenatal care, and coagulation disorders.

Controlled substances are those medications categorized by the federal government as having a higher potential for abuse or addiction. The included drugs are designated as Schedule II - V according to their medical use, potential for abuse, and safety or dependence liability.

Chronic medications, often referred to as maintenance medications, are those drugs taken on a routine bases and when not provided, have the potential for therapeutic failure.

This database contains Privacy Act information and is subject to criminal, civil and/or administrative penalties to those who willfully misuse this information and violate a person's rights under the Privacy Act. This information was provided pursuant a request from the Senior Medical Officer of this deploying unit. Reasonable and necessary security should be in place to protect this data from unauthorized users.

This program was developed by the TMA Pharmacoeconomic Center, Ft. Sam Houston, Texas. Please send any comments or suggestions to us at P-MART@amedd.army.mil or call 866-275-4732 and press option 8.

Army: The UA lists utilized here was obtained from USAMMA.
Navy: The AMMAL list utilized here was obtained from Naval Medical Logistics Command.

[Close This Form](#)



Patient Medication Profiles Button

P-MART | Prescription Medication Analysis And Reporting Tool - Patient Meds Profile

Filter Service Members By Unit

1st Level Unit:
2nd Level Unit:
3rd Level Unit:

Please select the first letter of the last name and locate the patient in the drop-down window

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

CADET, MARINE

Reset Name Filter Reset Unit Filters Reset All Filters

SSN: 833-33-3333 Patient Name: CADET, MARINE

1st Level Unit: 114th Subordinate Unit(s):

DepMed Used - Joint: CENTCOM Formulary

Add to Surgeon's Recall Roster: ☐

Print This Profile Export Profile Close This Form

Medication Profile

DrugName	Qty	Days Supply	Date Filled	High Risk	Controlled	CENTCOM
TRIAMCINOLONE ACETONIDE 0.1% CREAM(GM)	90	20	17 Apr 2009	☐	☐	☒
TOPICAL ANTI-INFLAMMATORY STEROIDA						
WALGREEN DRUG STORE #9094 AUSTIN MN Retail						
FLUTICASONE PROPIONATE 50MCG SPRAY SUSP	16	30	05 Apr 2009	☐	☐	☒
NASAL ANTI-INFLAMMATORY STEROID						
WALGREEN DRUG STORE #9094 AUSTIN MN Retail						
FLUTICASONE PROPIONATE 50MCG SPRAY SUSP	16	30	20 Feb 2009	☐	☐	☒

Record: 1 of 8 No Filter Search



Utilization by Drug Button

P-MART | Prescription Medication Analysis And Reporting Tool - Drug Utilization

Please select the first letter of the generic name and locate the drug in the drop-down window

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z Reset Filter

AZITHROMYCIN 250MG TABLET

Drug Name: AZITHROMYCIN 250MG TABLET High Risk Med Flag ☐

Generic Name: AZITHROMYCIN Controlled Med Flag ☐

Brand Name: AZITHROMYCIN CENTCOM Med Flag ☒

Drug Class: MACROLIDE

Print This Drug Use Export Profile Close This Form

Patients Utilizing

Patient Name	Qty	Days Supply	Date Filled
CADET, MARINE 333-33-3333 114th WALGREEN DRUG STORE #9094 AUSTIN MN Retail	6	5	20 Feb 2009
DOE, JOHN 777-77-7777 114th WALGREEN DRUG STORE #2355 ST PAUL MN Retail	6	5	16 Sep 2008
DOE, JOHN 777-77-7777 114th WALGREEN DRUG STORE #9094 AUSTIN MN Retail	6	5	23 May 2009

Record: 7 of 66 No Filter Search



Master Reports Selection Button

P-MART | Prescription Medication Analysis And Reporting Tool - Reports

Select a Report

- Chronic Med Use Summary**
- Chronic Medication Use
- Controlled Substance *Details*
- Controlled Substance *Summary*
- Drug Combination Report
- High Risk Medication *Details*
- High Risk Medication *Summary*
- Mefloquin Combination Patient
- Narcotic Medication *Details*
- Narcotic Medication *Summary*
- Non-DepMed Use *Details*
- Non-DepMed Use *Summary*
- Psychotropics *Details*
- Psychotropics *Summary*
- Surgeon's Recall Roster
- Total Utilization By Unit and Name

Select Report Options for Chronic Med Use Summary

Current setting for P-MART reporting dates:
From 28 May 2008 to 29 May 2009

[Change Reporting Dates](#)

[Select/Deselect Units to Include](#)

[High Risk Medication List](#)

[Suppress Drugs from Reports](#)

☒ Preview ☐ Print 

Report of drug utilization for Chronic Use medications. This is a summary report by drug.

[Close This Form](#)

Version 5 • May 2009



Drug Combination Report

P-MART | Prescription Medication Analysis And Reporting Tool - Reports

Select a Report

Chronic Med Use Summary
Chronic Medication Use
Controlled Substance *Details*
Controlled Substance *Summary*
Drug Combination Report
High Risk Medication *Details*
High Risk Medication *Summary*
Mefloquin Combination Patient
Narcotic Medication *Details*
Narcotic Medication *Summary*
Non-DepMed Use *Details*
Non-DepMed Use *Summary*
Psychotropics *Details*
Psychotropics *Summary*
Surgeon's Recall Roster
Total Utilization By Unit and Name

Select Report Options for Drug Combination Report

Select up to three medications from the list below to query the database for patients who have had prescriptions to all the selected medications.

Drug List Search

ACETAMINOPHEN
ACYCLOVIR
ALBUTEROL SULFATE
AMANTADINE HCL
AMLODIPINE BESYLATE
AMOXICILLIN TRIHYDRATE
AZITHROMYCIN
BENZONATATE

Change Reporting Dates

Suppress Drugs from Reports

Reset Selection

☒ Preview

☐ Print



Report show information on all the service members who were prescribed the selected drugs during the given report time frame.

[Close This Form](#)

Version 5 • May 2009



User Defined Combination Report

Drug Combination Report

Data current as of 6/3/2009

Date Range: 12/5/2009 - 6/1/2009

Service Members with Prescriptions for ALPRAZOLAM, OXYCODONE HCL, and SIMVASTATIN

SAILOR, NAVY

222222222

Drug Name:	ALPRAZOLAM 1MG	TABLET	Date Filled:	06 Jan 2009	
Qty:	60	Days Supplied:	30	Pharmacy: RITE AID PHARMACY 07231 #07231 MCCOMB M	Retail
Drug Name:	ALPRAZOLAM 0.5MG	TABLET	Date Filled:	06 May 2009	
Qty:	10	Days Supplied:	10	Pharmacy: WALGREENS DRUG STORE #10835 MCCOMB M	Retail
Drug Name:	OXYCODONE HCL 20MG	TAB.SR 12H	Date Filled:	14 May 2009	
Qty:	15	Days Supplied:	8	Pharmacy: RUCKER MAIN PHCY FT RUCKER AL	MTF



Narcotic "By Drug" Detail Report

Narcotic Medication Report

Data current as of 6/8/2009

Personal Data - Privacy Act of 1974 (PL 93-579)

HYDROCODONE BIT/ACETAMINOPHEN		CENTCOM	☒ HYDROCODONE-ACETAMINOPH	Qty	DS
SAILOR, NAVY	222-22-2222	GUIDEPOINT PHARMACY #102 ROCHESTER MN			Retail
HYDROCODONE BIT/ACETAMINOPHEN 5MG-500MG TABL	03 Apr 2009			120	30
SHIP, GUNNER	666-66-6666	WALGREEN DRUG STORE #10501 VIRGINIA MN			Retail
HYDROCODONE BIT/ACETAMINOPHEN 5MG-500MG TABL	28 Oct 2008			30	5
SOLDIER, ARMY	111-11-1111	DULUTH CLINIC-PHARMACY DULUTH MN			Retail
HYDROCODONE BIT/ACETAMINOPHEN 10MG-500MG TABL	20 Aug 2008			18	3
SOLDIER, ARMY	111-11-1111	WALGREEN DRUG STORE #3064 SUPERIOR WI			Retail
HYDROCODONE BIT/ACETAMINOPHEN 10MG-500MG TABL	23 Oct 2008			30	8
SOLDIER, ARMY	111-11-1111	DULUTH CLINIC-PHARMACY DULUTH MN			Retail
HYDROCODONE BIT/ACETAMINOPHEN 5MG-500MG TABL	07 Nov 2008			40	5
SOLDIER, ARMY	111-11-1111	DULUTH CLINIC-PHARMACY DULUTH MN			Retail
HYDROCODONE BIT/ACETAMINOPHEN 5MG-500MG TABL	12 Nov 2008			40	5
SOLDIER, ARMY	111-11-1111	DULUTH CLINIC-PHARMACY DULUTH MN			Retail
HYDROCODONE BIT/ACETAMINOPHEN 5MG-500MG TABL	26 Nov 2008			28	4
WOUNDED, WARRIOR	555-55-5555	WALGREENS DRUG STORE #11125 HIBBING MN			Retail
HYDROCODONE BIT/ACETAMINOPHEN 7.5-500MG TABLET	15 Aug 2008			16	2
WOUNDED, WARRIOR	555-55-5555	WALGREENS DRUG STORE #11125 HIBBING MN			Retail
HYDROCODONE BIT/ACETAMINOPHEN 7.5-500MG TABLET	20 Aug 2008			16	2
MORPHINE SULFATE		CENTCOM	☒ MORPHINE SULFATE	Qty	DS
SAILOR, NAVY	222-22-2222	GUIDEPOINT PHARMACY #102 ROCHESTER MN			Retail
MORPHINE SULFATE 30MG TABLET SA	13 Apr 2009			20	10
OXYCODONE HCL		CENTCOM	☐ OXYCODONE HCL	Qty	DS
SAILOR, NAVY	222-22-2222	KASSON DRUG STORE KASSON MN			Retail
OXYCODONE HCL 5MG TABLET	03 Jun 2008			40	20
SAILOR, NAVY	222-22-2222	KASSON DRUG STORE KASSON MN			Retail
OXYCODONE HCL 5MG TABLET	23 Jun 2008			40	20



Narcotic “By Drug” Summary Report

Narcotic Utilization Summary

Data current as of 6/8/2009

HYDROCODONE BIT/ACETAMINOPHEN

HYDROCODONE BIT/ACETAMINOPHEN 10MG-500MG TABLET	# of Rxs: 2	Unique Pts: 1	CENTCOM ☐
HYDROCODONE BIT/ACETAMINOPHEN 5MG-500MG TABLET	# of Rxs: 5	Unique Pts: 3	CENTCOM ☒
HYDROCODONE BIT/ACETAMINOPHEN 7.5-500MG TABLET	# of Rxs: 2	Unique Pts: 1	CENTCOM ☐

MORPHINE SULFATE

MORPHINE SULFATE 30MG TABLET SA	# of Rxs: 1	Unique Pts: 1	CENTCOM ☒
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OXYCODONE HCL

OXYCODONE HCL 5MG TABLET	# of Rxs: 6	Unique Pts: 1	CENTCOM ☐
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OXYCODONE HCL/ACETAMINOPHEN

OXYCODONE HCL/ACETAMINOPHEN 5MG-325MG TABLET	# of Rxs: 2	Unique Pts: 2	CENTCOM ☒
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TRAMADOL HCL

TRAMADOL HCL 50MG TABLET	# of Rxs: 7	Unique Pts: 3	CENTCOM ☒
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Psychotropic "By Drug" Detail Report

Psychotropic Medication Report by Drug

Data current as of 6/3/2009

Personal Data - Privacy Act of 1974 (PL 93-579)

Date Range: 12/5/2009 - 6/1/2009

ALPRAZOLAM

ALPRAZOLAM

POS

Qty

DS

SAILOR, NAVY 222-22-2222

Retail

60

30

ALPRAZOLAM 1MG TABLET

06 Jan 2009

RITE AID PHARMACY 07231 #07231 MCCOMB M

Provider ID: MA1149574 ALDRIDGE, MARCE NIA P NP

SAILOR, NAVY 222-22-2222

Retail

10

10

ALPRAZOLAM 0.5MG TABLET

06 May 2009

WALGREENS DRUG STORE #10835 MCCOMB M

Provider ID: BS4069161 STONNINGTON, MICHAEL JAMES MD

SHIP, GUNNER 666-66-6666

MTF

60

30

ALPRAZOLAM 0.5MG TABLET

31 Mar 2009

RUCKER MAIN PHCY FT RUCKER AL

Provider ID: BD8160157 DIEL, KEVIN RAY MD

SHIP, GUNNER 666-66-6666

MTF

60

30

ALPRAZOLAM 0.5MG TABLET

01 Jun 2009

RUCKER MAIN PHCY FT RUCKER AL

Provider ID: FD0656883 DIEL, KEVIN RAY MD

ARIPIPIRAZOLE

ABILIFY

POS

Qty

DS

SOLDIER, ARMY 111-11-1111

Retail

30

30

ARIPIPIRAZOLE 15MG TABLET

10 Dec 2009



Psychotropic "By SM" Detail Report

Psychotropic Medication Dispensing Report

Data current as of 6/8/2009

Personal Data - Privacy Act of 1974 (PL 93-579)

DOE, JOHN		77777777	Qty	DS
BUDEPRION SR		3/2/2009 Retail	60	30
BUPROPION HCL 150MG	TABLET SA	WALGREENS DRUG STORE #11125 HIBBING MN		
BUDEPRION SR		1/28/2009 Retail	60	30
BUPROPION HCL 150MG	TABLET SA	WALGREEN DRUG STORE #9094 AUSTIN MN		
BUDEPRION XL		9/21/2008 Retail	30	30
BUPROPION HCL 300MG	TAB.SR 24H	CVS/PHARMACY #05998 #05998 SAINT PAUL MN		
BUDEPRION SR		3/29/2009 Retail	60	30
BUPROPION HCL 150MG	TABLET SA	WALGREEN DRUG STORE #9094 AUSTIN MN		
BUDEPRION XL		6/24/2008 Retail	60	30
BUPROPION HCL 150MG	TAB.SR 24H	RITE AID PHARMACY 11860 #11860 MIDLAND GA		
BUDEPRION XL		8/20/2008 Retail	60	30
BUPROPION HCL 150MG	TAB.SR 24H	WAL-MART PHARMACY #100913 DECORAH IA		
BUDEPRION XL		7/14/2008 Retail	30	30
BUPROPION HCL 300MG	TAB.SR 24H	WALGREEN DRUG STORE #9094 AUSTIN MN		
BUDEPRION XL		10/20/2008 Retail	30	30
BUPROPION HCL 300MG	TAB.SR 24H	WALGREEN DRUG STORE #4882 INVER GROVE HE		
BUDEPRION XL		11/21/2008 Retail	30	30
BUPROPION HCL 300MG	TAB.SR 24H	WALGREEN DRUG STORE #9094 AUSTIN MN		
BUDEPRION SR		4/18/2009 Mail Order	180	90
BUPROPION HCL 150MG	TABLET SA	EXPRESS SCRIPTS TEMPE AZ		
PILOT, COMBAT		44444444	Qty	DS
CLONAZEPAM		5/11/2009 Retail	90	30



Psychotropic “By SM” Dispensing Summary Report

Psychotropic Patient Dispensing Summary

Data current as of 6/8/2009

Personal Data - Privacy Act of 1974 (PL 93-579)

DOE, JOHN

77777777

BUDEPRION SR	BUPROPION HCL 150MG	TABLET SA	# of Rx's	4
BUDEPRION XL	BUPROPION HCL 150MG	TAB.SR 24H	# of Rx's	2
BUDEPRION XL	BUPROPION HCL 300MG	TAB.SR 24H	# of Rx's	4

PILOT, COMBAT

44444444

CLONAZEPAM	CLONAZEPAM 1MG	TABLET	# of Rx's	2
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SAILOR, NAVY

22222222

LORAZEPAM	LORAZEPAM 1MG	TABLET	# of Rx's	5
SERTRALINE HCL	SERTRALINE HCL 100MG	TABLET	# of Rx's	1



Psychotropic “By Drug” Summary Report

Psychotropic Medication Utilization Summary

Data current as of 6/3/2009

Personal Data - Privacy Act of 1974 (PL 93-579)

Date Range: 12/5/2009 - 6/1/2009

ALPRAZOLAM

ALPRAZOLAM 0.5MG	TABLET	# of Rxs: 3	Unique Pts: 2
ALPRAZOLAM 1MG	TABLET	# of Rxs: 1	Unique Pts: 1

ARIPIRAZOLE

ARIPIRAZOLE 15MG	TABLET	# of Rxs: 5	Unique Pts: 1
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BUPROPION HCL

BUPROPION HCL 150MG	TABLET SA	# of Rxs: 2	Unique Pts: 1
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CITALOPRAM HYDROBROMIDE

CITALOPRAM HYDROBROMIDE 20MG	TABLET	# of Rxs: 5	Unique Pts: 1
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CLONAZEPAM

CLONAZEPAM 0.5MG	TABLET	# of Rxs: 3	Unique Pts: 1
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DIVALPROEX SODIUM

DIVALPROEX SODIUM 250MG	TAB. SR 24H	# of Rxs: 6	Unique Pts: 1
DIVALPROEX SODIUM 500MG	TAB. SR 24H	# of Rxs: 6	Unique Pts: 1

ESCITALOPRAM OXALATE

ESCITALOPRAM OXALATE 10MG	TABLET	# of Rxs: 1	Unique Pts: 1
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Chronic Medication "By SM" Report

Chronic Medication Report by Patient

Data current as of 6/4/2009

Personal Data - Privacy Act of 1974 (PL 93-579)

Date Range: 12/5/2008 - 6/1/2009

<i>CADET, MARINE</i>		<i>333333333</i>	<i>POS</i>	<i>Qty</i>	<i>DS</i>
CAPECITABINE 500MG	TABLET		Retail	105	15
XELODA		11 Dec 2008			
MARTINS PHARMACY OXFORD AL					
Provider ID: BP5706304		POSEY, JAMES ARTHUR III MD			
CAPECITABINE 500MG	TABLET		Retail	105	15
XELODA		28 Apr 2009			
MARTINS PHARMACY OXFORD AL					
Provider ID: BP5706304		POSEY, JAMES ARTHUR III MD			
CAPECITABINE 500MG	TABLET		Retail	105	15
XELODA		27 May 2009			
MARTINS PHARMACY OXFORD AL					
Provider ID: BP5706304		POSEY, JAMES ARTHUR III MD			
<i>DOE, JOHN</i>		<i>777777777</i>	<i>POS</i>	<i>Qty</i>	<i>DS</i>
ALENDRONATE SODIUM 70MG	TABLET		Retail	12	83
ALENDRONATE SODIUM		17 Dec 2008			
WAL-MART PHARMACY #100329 ANNISTON AL					
Provider ID: AT2486466		THOMAS, CARLA NEWBERN MD			
ERGO CALCIUM 50000 UNIT CAPSULE			Retail	90	87



"Unavailable at Mail Order" Report

Service Members with Medications Unavailable at Mail Order

Data current as of 6/8/2009

Service Member: DOE, JANE

SSN: 888888888

Unavailable Med:	OTC	OXYMETAZOLINE HCL 0.05% SPRAY
Unavailable Med:	OTC	BENZOYL PEROXIDE 5% GEL
Unavailable Med:	OTC	EUCALYPTUS OIL/MENTHOL 7.6MG LOZENGE
Unavailable Med:	OTC	GUAIFENE SIN 100MG/5ML LIQUID
Unavailable Med:	OTC	GUAIFENE SIN/P-E PHED HCL 1200-120MG TAB.SR 12H
Unavailable Med:	OTC	IBUPROFEN 200MG TABLET
Unavailable Med:	OTC	LANOLIN/MINERAL OIL LOTION
Unavailable Med:	OTC	ACETAMINOPHEN 325MG TABLET
Unavailable Med:	OTC	METHYL SALICYLATE/MENTHOL 15%-10% CREAM(GM)
Unavailable Med:	OTC	PADIMATE O STICK (EA)
Unavailable Med:	OTC	PHENOL/SODIUM PHENOLATE SPRAY
Unavailable Med:	OTC	PHENYLEPHRINE HCL 10MG TABLET
Unavailable Med:	OTC	POLYVINYL ALCOHOL/POVIDONE 1.4-0.6% DROPERETTE
Unavailable Med:	OTC	PSEUDOEPHEDRINE HCL 30MG TABLET
Unavailable Med:	OTC	MEDICAL SUPPLIES BANDAGE

Service Member: SAILOR, NAVY

SSN: 22222222

Unavailable Med:	TEMP SENSITIVE	PROMETHAZINE HCL 25MG SUPP.RECT
Unavailable Med:	OTC	DOCUSATE SODIUM 100MG CAPSULE



"Your PMART Statistics Report"

Medication Use Statistics

Date Range: 5/28/2008 - 5/29/2009

Personal Data - Privacy Act of 1974 (PL 93-579)

Current Number of Service Members : 8
Current Number of Prescriptions: 129
Current Number of Service Members with Prescriptions:  8 100.0%

The below statistics are all subject to available filtering. If you have deselected units or changed the reporting date range on the previous window (Details/Admin window), the counts below will report within these restrictions. The percentages below use Current Number of Service Members/Prescriptions as the denominator.

	Number of Rx's		Number of SMs on at least one:	
High Risk Medications:	25	19.4%	4	50.0%
Non-Deployment Medications:	60	46.5%	8	100.0%
Chronic Medications:	59	45.7%	8	100.0%
Controlled Medications:	25	19.4%	 6	75.0%
Narcotic Medications:	25	19.4%	 5	62.5%



PMART Facts and Findings

- 700 PMART/WTU reports completed resulting in 8.4 million reviewable prescriptions for 1.8 million service members
- Completed 479 Army, 154 Navy, 37 Air Force, 29 Marine, & 1 Coast Guard PMART/WTU reports
- Identified 408,658 (23%) service members who were taking high-risk medications

Current as of 31 May 11



PMART Summary

- **PMART is a tool to assist in the pre-deployment medical screening process**
- **Fast and efficient tool for screening medication use**
- **Easy to navigate and no additional cost to use**
- **Specialized to a particular audience, for a specific purpose**



How To Order PMART Report?

- Contact PEC at DSN 471-8274 COMM 210-221-8274 or email p-mart@amedd.army.mil
- Provide Unit Alpha Roster via PEC Secure Server
- Complete Sensitive Data Request Form
- Located at:

www.pec.ha.osd.mil/pmart



Sensitive Data Request Form

Request for Sensitive Data in Support of Deployments (P-MART) or Warriors in Transition (WTU/P-MART) v.2

In order for the TMA Pharmacy Operation Center (POC) to release data contained in our Prescription Databases to other DoD Organizations, it is necessary you justify your organization's success depends on access to the information, which is deemed sensitive under the Privacy Act of 1974, therefore establishing a "need to know".

- Please complete (including signature) this request form and send via fax to "Data Management Team (DMT)" at the TMA POC at 210-221-8131.
- To ensure legibility, please type out your request.
- For assistance completing this form or any other related information you can email the DMT at P-MART@amedd.army.mil or call the POC at 1-866-275-4732, select option 8 and ask for a Data Management Team member.

Type of database request:

Date of Request:

Date Required (we prefer 3-5 business days, but can process sooner if required, call the POCs above to arrange):

Requesting Site (Installation Name):

Requesting Service/Command:

Requestor's Name (and Rank, if applicable):



Sensitive Data Release Form (cont)

NOTICE:

The undersigned acknowledges that criminal penalties under the Privacy Act (5 U.S.C. § 552a(i) (3)) may apply if it is determined that the undersigned, or any individual employed or affiliated therewith, knowingly and willfully obtained the file(s) under false pretenses. Further, the undersigned acknowledges that criminal penalties may be imposed under 18 U.S.C. § 641, which provides that if it is determined that the undersigned, or any individual employed or affiliated therewith, has taken or converted to his own use data file(s), or received the file(s) knowing that they were stolen or converted, they shall be fined under Title 18, imprisoned not more than 10 years, or both. In addition, the undersigned and any individual employed or affiliated therewith may be subject to civil suit under the Privacy Act for damages which occur as a result of willful or intentional actions which violate an individual's rights under the Privacy Act.

By signing this Agreement, the undersigned agrees to abide by all provisions set out in this Agreement for protection of the data file(s) requested, and to ensure that all individuals having access to the requested files are appropriately educated regarding the requirements of the Privacy Act. The undersigned acknowledges having received notice of potential criminal, administrative, or civil penalties for violation of the terms of the Agreement.

Requested by:

Approved By:

And / Or:

Signature

Printed Name

Title and Organization

Date

Signature

Mr. Hector Morales

Printed Name

*Deputy Director, TMA Pharmacy
Operation Center*

Title and Organization

Date

Signature

LTC Stacia Spridgen

Printed Name

*Director, DoD Pharmacoeconomic
Center*

Title and Organization

Date



DoD Pharmacoeconomic Center Fort Sam Houston, TX

Deployment Prescription Program (DPP) Overview



TMA Pharmacy Operations Center (POC)

- **Serves as the point of contact for all questions about deployment prescriptions**
- **Liaison between the MTF, SM and the mail order pharmacy (MOP) to ensure processing of refills in theater**
- **Liaison between the Senior Theater Pharmacy Consultant, Theater pharmacy officers, and SRP sites for updated CENTCOM guidance**



Prior To Deployment.....

1. **MTF/BDE or DIV Surgeon/Pharmacy Officer uses a P-Mart to pre-screen for medication needs**
2. **MTF/Deployment Site provides briefing information to SMs on deployment Rx process**
3. **Providers prescribe medications for deploying SMs using a mail order registration Rx form**



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SRP Site Responsibilities

- Provide Pharmacy Briefing
- Dispense 1st 180-day supply of chronic medications
- Complete Mail Order Prescription and Registration form
 - Valid email address
 - Give a refill on Rx submitted
 - Provider Signature
- Provide MOP reminder card contact information
- Assists SMs with MOP registration/Rx form to enroll in mail order
- Send all completed mail order forms to POC at end of day
- Contact POC for assistance with mail order process or for PMART information

TRICARE Mail Order Pharmacy (TMOP) Registration and Prescription Form
(ESI Note - FOR DEPLOYMENT PRESCRIPTION PROGRAM ONLY) VERSION 11

Today's Date (MM/DD/YYYY): _____ FOR USE IN: _____

Patient Information

Last Name: _____ First Name: _____ MI: _____

Date of Birth (MM/DD/YYYY): _____ Gender: _____ Full SSN: _____

CONUS: Mailing Address APO/POB/Base & ZIP: _____
(Deployed address preferred. Home address only if deployed unknown.)

OCONUS: APO Mailing Address FOR/ Base & ZIP: _____

Unit Name: _____

AKO/DKO/ Email Address: _____

CONUS Home Phone: _____
(provide APO if known)

OCONUS Deployed Phone: _____

Allergies (check in category that applies)

No Known Drug Allergies ☐ Known Drug Allergies ☐ Specify: _____

To update the registration form on-line use one of these options:
1- log on to <http://www.us.army.mil> click on MY MEDICAL go to link for Deployment Maintenance Medication Program
2- or call the POC at 1-866-275-4732 (DSN 312-471-8274) press option #5
3- or call ESI at 1-866-363-8667 or by web to: <http://www.express-scripts.com/custom/dod/tmopfaq/>

NOTE: CII's original hardcopy must be mailed to address on form. It cannot accompany another class of medication.

To check medication availability: <http://www.tricareformularysearch.org/dod/medicationcenter/default.aspx>

Drug Name & Formulation (Equivalent substitution allowed)	Strength	Unit	Form	Qty	Directions	Refills
1)						
2)						
3)						
4)						
5)						

PRINT Provider's Name: _____ Email: _____ Phone: _____

Providers Signature: _____ NPI#: _____ or Provider SSN: _____

DEA#: Required for controlled drugs _____

Upon completion submit to secure server <https://pecweb.samhouston.army.mil/action/loginEmail> Email AMEDDCS@AMEDD.ARMY.MIL for secure server access instructions. Please **DO NOT** email prescriptions to PDTS.

AMEDDCS@AMEDD.ARMY.MIL or fax to (210) 221-8131, DSN 471-8131

or mail to:
DoD PEC
2450 Stanley Rd, Bldg 1000, Rm 208
Fort Sam Houston, TX 78234-6102
Attn: POC/TMOP Team

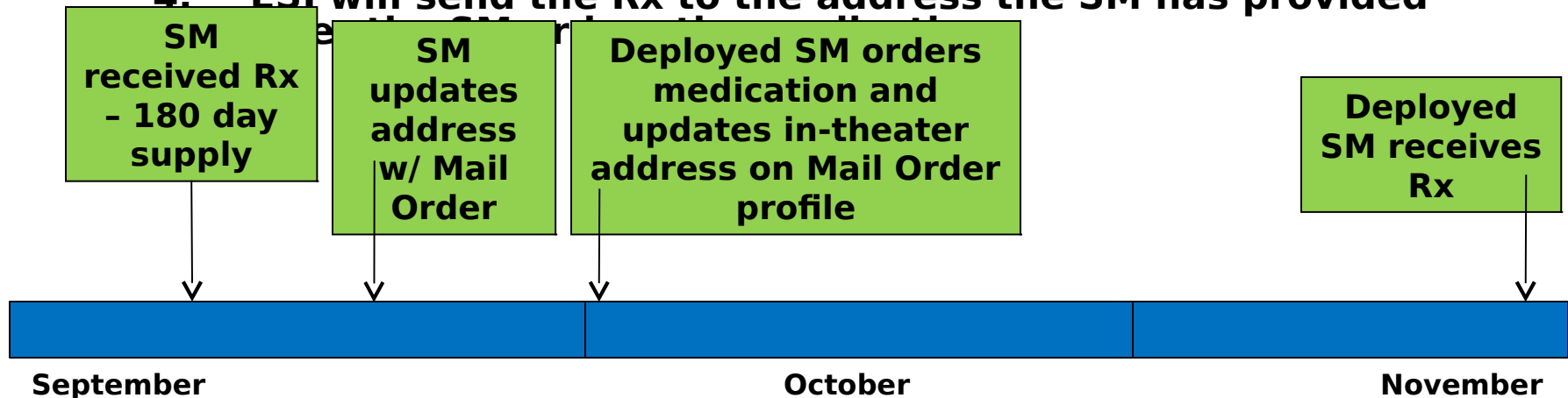
For questions or problems call
1-866-275-4732 (DSN 471-8274) press option #5



DPP Process Steps

1. Mail order registration Rx form sent to the POC for processing
2. ESI sends an e-mail to the SM two months into deployment requesting SMs to update their online registration with their current mailing address (APO/FPO)
3. ESI sends an e-mail four months into deployment reminding the SM to order refill medication.

4. ESI will send the Rx to the address the SM has provided





Reminder Messages Sent to

Deployed Service Member

- **Two emails are sent to SM's email address from Express-Scripts. Inc**
 - **2 months into deployment for address update**
 - **4 months into deployment for medication order**
- **SM SHOULD ACTIVELY LOOK FOR EMAILs**
- **Only requested medication will be delivered**

****IF SM DOES/CAN NOT RECEIVE EMAILS,
CONTACT THE POC****



Pending (On Hold) Prescription E-mail Notification

TMOP Email Reminder

From: Notifications@express-scripts-pharmacy.com <Notifications@express-scripts-pharmacy.com>
Sent: Sunday, July 15, 2007 12:57 PM
To: jane12doe34@gmail.com
Subject: Register Online for the TRICARE Mail Order Pharmacy

Dear Jane Doe,

This is a courtesy reminder from the TRICARE Mail Order Pharmacy (TMOP) operated by Express Scripts. **You must take the action described below to receive follow-on prescription medication while deployed.**

You have been identified as having one or more prescriptions that will be mailed to you during your deployment. You must first activate your account on the TMOP website to receive an e-mail reminder when these prescriptions become available for delivery (see directions below).

TO ACTIVATE YOUR ACCOUNT NOW:

- 1) Visit http://www.express-scripts.com/custom/dod/ben_message/
- 2) Click "Activate Your Online Account."
- 3) Complete all steps of the activation process.

PLEASE NOTE: The e-mail reminder will be sent to the e-mail address that you specify during the enrollment process.

The activation process takes only a few minutes and provides access to several online features of your TMOP benefit, including benefit details, online ordering, drug and health information, and more.

If you have already activated your account, please sign in by visiting <https://member.express-scripts.com/web/member/loginreg/dodLoginStart.do> and verify your current shipping and e-mail address.

If you have any questions, please call 1.866.DOD.TMOP (1.866.363.8667), or log on to your account and visit the Contact Us section.



Receiving Medication Refills While Deployed

Business Card Reminder



Reminders to Ensure You Receive Your Refill Meds

1. Update APO/FPO address & email address online
http://www.expressscripts.com/custom/dod/ben_message/
2. If email from ESI is not received 60 days after arriving in theater, contact DOD Pharmacy Operations Center (POC) open 24/7 @ DSN 312-471-8274 or 1-866-275-4732)
3. If you don't have internet access to update your address or other problems, contact the DOD POC by phone, e-mail or mail
PDTS.AMEDDCS@amedd.army.mil. DOD PEC 2450
Stanley Rd Suite 208 Ft. Sam Houston, TX 78234



CENTCOM Surgeon Policy for Psychotropic Medications (MOD 10)

- **Deploying SMs (and other TRICARE eligible contractors and civilians) will receive initial 180 day supply of psychotropic medications at SRP sites**
- **Exception is for CII stimulants - 90 day**
- **Follow-up care and refill/new prescriptions will need to be written by a provider in theater to ensure close monitoring**
- **Renewal prescriptions will be filled entirely in theater for a new (up to) 180 day supply, at which point the patient will need to be seen again for another new prescription.**
- **If SM stable on a psychotropic medication and has enough medication on hand, the theater provider may send a new prescription to the POC**



CENTCOM Policy (MOD 10) - continued

- **SRP site responsible for telling deploying SMs what they must do to:**
 - **Obtain a refill for psychotropic medications while in theater**
 - **If prescriptions are being written for anti-seizure medications but used for other indications than mood control, providers must write the indication on the Mail Order registration/Rx form**
 - **POC will process refills through the Mail Order for these medications**



Special Mail Order Situations

- **Schedule II controlled substances (i.e. Concerta ®) require an original paper prescription with an accurate provider's DEA and/or provider SSN**
- **Schedule II Rxs must be mailed to the POC**
- **90-day supply of Schedule II RXs is authorized at one time with no refills.**
- **Retired TRICARE eligible beneficiaries working as deployed contractors using Mail Order are responsible for any applicable co-pays**

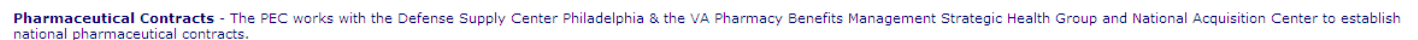


Mail Order Prescription Limitations

- Temperature controlled medications **will not be** provided by Mail Order
- OTC medications **are not part of the TRICARE pharmacy benefit** through Mail Order (exception of Prilosec OTC, Claritin 10mg, Claritin-D, Zyrtec 10mg and Zyrtec-D)
- ****Allegra is considered OTC and is not available through MOP****
- Provider signature is required
- No digital signatures accepted



Notices and Disclaimers





Contact Information

pdts.ameddcs@amedd.army.mil

DoD Pharmacoeconomic Center

ATTN DPP Team

4130 Stanley Rd, Suite 208

Ft Sam Houston, TX 78234

**1-866-275-4732 press menu
option 5**